SEC 1972 Potential persons who are to respond to the collection of information contained in this form are (6-02) not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response... 1

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

| 4 | PROC | ESSED |
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DATE RECEIVED

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) |
|---|
| Class 'A' Preferred Convertible Stock |
| Filing Under (Check box(es) that [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE apply): |
| Type of Filing: [X] New Filing [] Amendment |
| A. BASIC IDENTIFICATION DATA |
| A. BASIC IDENTIFICATION DATA |

1. Enter the information requested about the issuer



| Name of Issuer ([] check if the | s is an amendment and name has changed, and indicia | ate change.) |
|--|---|---|
| INTREorg Systems, Inc. | | |
| Address of Executive Offices Code) | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area |
| 219 Josey Ln. | Red Oak, TX 75154 | 214-677-8297 |
| Address of Principal Business (Area Code) (if different from Executive Offi | Operations (Number and Street, City, State, Zip Code) ces) | Telephone Number (Including |
| Brief Description of Business | | •••••• |
| Information Technology Con | sulting | |
| Type of Business Organization | | *************************************** |
| [X] corporation [] business trust | [] limited partnership, already formed [] othe [] limited partnership, to be formed | er (please specify): |
| | Month Year | |
| | orporation or Organization: [1]1] [0]3] [X]Ac | |
| Jurisdiction of incorporation of t | Organization: (Enter two-letter U.S. Postal Service abbr CN for Canada; FN for other foreign jurisdict | |
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GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> or Section 4(6), 17 CFR 230.501 et seg. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice

shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed. A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that [] Promoter [X] Beneficial [X] Executive [X] Director [] General and/or Apply: Owner Officer Managing Partner Full Name (Last name first, if individual) Smith, Alton K. Business or Residence Address (Number and Street, City, State, Zip Code) 219 Josey Ln, Red Oak, TX 75154 Check Box(es) that [] Promoter [X] Beneficial [X] Executive [X] Director [] General and/or Officer Apply: Owner Managing Partner Full Name (Last name first, if individual) Russell K. Boyd Business or Residence Address (Number and Street, City, State, Zip Code) 219 Josey Ln, Red Oak, TX 75154 [] Director [] General and/or Check Box(es) that [] Promoter [] Beneficial [] Executive Officer Apply: Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that [] Promoter [] Beneficial [] Executive [] Director [] General and/or Officer Apply: Owner Managing

Full Name (Last name first, if individual)

Partner

| Business or Resider | ice Address (Nui | nber and Stree | t, City, State, Zip Co | ode) | |
|--|---|---|---|--|---|
| Check Box(es) that Apply: | [] Promoter [|] Beneficial Owner | [] Executive Officer | [] Director [| General and/or Managing Partner |
| Full Name (Last nar | ne first, if individ | ual) | | *************************************** | |
| Business or Resider | nce Address (Nur | nber and Stree | t, City, State, Zip Co | ode) | *************************************** |
| Check Box(es) that Apply: | [] Promoter [|] Beneficial Owner | [] Executive Officer | [] Director [|] General and/or Managing Partner |
| Full Name (Last nar | me first, if individ | ual) | | | |
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| Check Box(es) that Apply: | [] Promoter [|] Beneficial Owner | [] Executive Officer | [] Director [|] General and/or Managing Partner |
| Full Name (Last nar | ne first, if individ | | | | |
| Business or Resider | nce Address (Nui | nber and Stree | t, City, State, Zip Co | ode) | |
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| *************************************** | *************************************** | D. 1141 OI | | | |
| 1. Has the issuer sol offering? | d, or does the iss | suer intend to s | ell, to non-accredited | d investors in this | Yes No [] [X] |
| 2. What is the minim | | | Column 2, if filing un pted from any individ | | \$1,000 |
| 3. Does the offering | permit joint own | ership of a sing | le unit? | ************* | Yes No [X] [] |
| 4. Enter the informat directly or indirectly, connection with sale person or agent of a list the name of the associated persons of broker or dealer only | any commission s of securities in broker or dealer broker or dealer. of such a broker | or similar remothe offering. If registered with If more than five | uneration for solicitat a person to be listed the SEC and/or with ve (5) persons to be | ion of purchasers is an associated r a state or states listed are | in |
| Full Name (Last nar | ne first, if individ | ual) | | *************************************** | *************************************** |
| N/A | | | | | |
| Business or Resider | nce Address (Nu | mber and Stree | t, City, State, Zip Co | ode) | |
| Name of Associated | Broker or Deale | er | | | |
| | | | nds to Solicit Purcha | | |
| (Check "All States | | | | |] All States [HI] [ID] |

C.

| (IL) [MT] [RI] | [IN] [NE] [SC] | [IA] [NV] [SD] | [KS] [NH] [TN] | [KY] [NJ] [TX] | [LA] [NM] [UT] | [ME] [NY] [VT] | [MD] [NC] [VA] | [MA] [ND] [WA] | [MI] [OH] [WV] | [MN] [OK] [WI] | [MS] [OR] [WY] | [MO] [PA] [PR] |
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| Full N | lame (La | ast nam | e first, if | individu | ıal) | ****************** | *************************************** | ******************** | ************* | *************************************** | | |
| Busin | ess or F | Residenc | e Addre | ss (Num | ber and | Street, | City, Sta | te, Zip C | ode) | ********************** | *************************************** | |
| Name | | | | | | ********* | *************************************** | | *************************************** | *************************************** | | |
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| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | | | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| | | | | | [MM] | | | | | | | |
| [RI] | [SC] | [SD] | [TN] | [XT] | [UT] | [VT] | [VA] | [WA] | [VVV] | [VVI] | [WY] | [PR] |
| Full N | lame (La | ast nam | e first, if | individu | ıal) | ************************** | ********************** | na a a fila mala a a fa a anticala fa an | PARTERIO AL CONTENDO DE LA CONTE | MARKAMATAN MAJAWA, TATAWA | ************************************** | |
| Busin | ess or F | Residenc | e Addre | ss (Num | ber and | Street, | City, Sta | te, Zip C | ode) | a,a. e. a. e. | ********************* | |
| Name | of Asso | ociated I | Broker o | r Dealer | *************************************** | ************ | *************************************** | *************** | ************** | ******************* | ******************* | |
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| | | | | | | | | | | | | |
| | | | | | | | | | | g Price | | Sold |
| Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) | | | | | | | | | | | | |
| J | =quity | | | | | | | | \$500,000 | .00 | \$85,500 |).00 |
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2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the

| number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | | |
|---|--|---|--------------------|
| Accredited Investors | Number Investors | | mount nases |
| Non-accredited Investors | 0 | _ \$ | 0 |
| Total (for filings under Rule 504 only) | | \$ | |
| Answer also in Appendix, Column 4, if filing under ULOE. | | | |
| 3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. | | | |
| Type of offering | Type of Security | Dollar A Sold | mount |
| Rule 505 | | \$ | |
| Regulation A | | \$ | |
| Rule 504 | | \$ | |
| Total | | Ф | |
| 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) blue sky filing fees Total | | [] \$ [] \$ [] \$5,000 [] \$ [] \$ [] \$1,000 [] \$6.000 | 0.00 |
| b. Enter the difference between the aggregate offering price given in requestion 1 and total expenses furnished in response to Part C - Quedifference is the "adjusted gross proceeds to the issuer." | response to Part C estion 4.a. This ssuer used nt for any eft of the ross above. | \$494,0 | |
| | , Offic | • | Boymente To |
| | ∆ffili | ctors, & | Payments To Others |
| Salaries and fees | | 175,000 | [X] \$30,000 |
| Purchase of real estate | []\$_ | | []\$ |

[]\$_____

[X] \$25,000

Purchase, rental or leasing and installation of machinery

and equipment

| Construction or leasing of plant buildings and facilities | []\$ | []\$ |
|--|----------------------------|-------------------------------|
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) | []\$ | []\$ |
| Repayment of indebtedness | | []\$_ [X]\$266,000 []\$ |
| | []\$ | []\$ |
| Column Totals | [X] \$175,000 [X] \$4 | [X] \$321,000 496,000 |

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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

| Issuer (Print or Type) | Signature Date | |
|--------------------------------|---------------------------------|---|
| INTREorg Systems, Inc. | alton L. Smith June 22, 200 | 4 |
| Name of Signer (Print or Type) | Title of Signer (Print or Type) | |
| Alton K. Smith | Director/President | |

| | ATTENTION |
|---|--|
| | Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 |
| 3 | U.S.C. 1001.) |

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Provisions of such rule?

Yes No

[] [X]

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state-law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type) | Signature / Date |
|--------------------------------|--------------------------|
| INTREorg Systems, Inc. | Alton Long June 22, 2004 |
| Name of Signer (Print or Type) | Title (Print or Type) |
| | Director/President |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

| 1 | 2 | | 3 | | 5 Disqualification | | | | |
|----------|---|----------------------|--|--|---|---|---|---|----|
| | Intend to to non-ac- investors (Part B-l | credited in State | Type of security and aggregate offering price offered in state (Part C-Item 1) | | Type of invenount purchat (Part C-It | under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | |
| State | Yes | No | | Number of Accredited Investors | | Number of Non- Accredited Investors | Amount | Yes | No |
| AL | | 140 | | 1114031013 | - Allount | 1114631013 | Amount | 103 | |
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